

***Medi-Cal Management Information
System and Decision Support System (MIS/DSS)***

***Data Enhancement Functional Specifications
for Case
Phase 5***



March 23, 2000

1. Overview

Figure 1 gives a high-level view of the major conversion processes and helps illustrate the relationship between the processes. The shaded box represents the conversion process being discussed in this section.

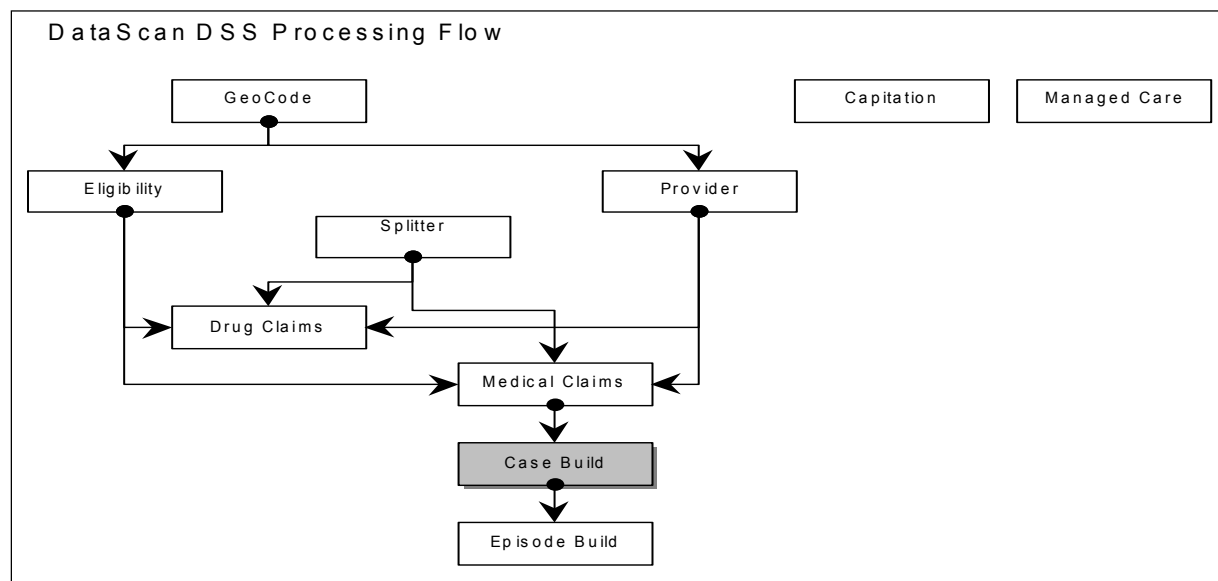


Figure 1: DataScan DSS Processing Flow

An Inpatient Case, or admission, represents a series of healthcare services related to the treatment of a patient during a hospital stay. It is a summary of inpatient services (see the Medical Service Specification) for a hospital admission, integrating professional and hospital claims. Every inpatient service row belongs to an Inpatient Case row. Some clinical assignments are made during the Case Build, such as the Primary Diagnosis Code (PDX), Primary Procedure Code (PPROC), Diagnosis Related Group (DRG), Disease Stage (STAGE), the Case Major Diagnostic Category (MDC), and the Case Ambulatory Surgery Group (AMBSRG).

An Inpatient Case begins with an admission record, which is identified by a room and board type of service. New admission records can fall within an existing case, extend an existing case, or form a new case. A case ends when there is a gap in time (a day without a room and board claim) or when a transfer record is encountered.

2. Prerequisites / Pre-Conversion

The following must be completed before the Case Build:

- Claim EDIT program – checks field content and format against DataScan validation tables. Edit also separates the claims into caseable and non-caseable claim files.
- Review of the EDIT report
- Load of IP and OP Service Tables

3. Indexes

The Database index for the Case Table will be as follows:

- Primary – PRODUCT, ELIGCAT, NETWORK, ELIGCNTY, EMPID
- Secondary2 – EMPID, MEMBERNO
- Secondary3 – CASEID
- Secondary4 – APPLIND, ADMDATE
- Secondary5 – ADMDTTY, ADMDTMM
- Secondary6 - EPIID

4. Input Data

- Case Build creates and reads a driver file containing all unique EMPID/MEMBERNO combinations.
- Case Build retrieves all caseable records from the New Claim File, which is a sorted file containing all Inpatient Claims records (PLACE = 1-19 (IP), 23 (ER) or 0 (Missing)).
- Case Build retrieves all caseable records from the IP Claim Table, the OP Claim Tables, the IP Case Table, and the Case2 Table on the existing database (during an update) for all unique EMPID/MEMBERNO combinations.

5. Output Data

- The **Case** Table. This table contains aggregated claims information for every admission. See Field-level Functional Specifications for a list of the fields included in this table.
- The **IP Service** Detail Table is updated. This table contains all inpatient claims that are part of an inpatient case.
- The **IP Paid** Table is updated. This table contains claims where the case admit date is outside the database window and the paid date is within the window, (which represent cases that have rolled off the Case Table).
- The four **OP Service** Detail Tables are updated. These tables contain all records with PLACE greater than 19 (outpatient) and not equal to 23 (ER). Also, records with PLACE less than 20 (inpatient) or equal to 23 (ER) or 0 (Missing) that did not fit into a case become assigned to an outpatient table.
- The **Case2** Table is updated. This table contains up to 15 procedure codes and 15 diagnosis codes for each case, to be used by the Disease Staging software.

6. Reports

Reports generated by the Case Build include:

- Inpatient Case Data Quality Indicators
- Descriptive Statistics for IP Case core fields
- Source of Payments (separate job, not created directly from the Case Build)

7. Selection / Drop Criteria

A Case is deconstructed if:

- AGE equals 0 or missing for the Case and any of the following fields is less than 1: TOTCHG, TOTPAY, HOSPCHG, or HOSPPAY
- AGE is greater than 0 for the Case and any of the following fields is less than the amount specified in the DB_DEF Table (set to \$300 for Medi-Cal): TOTCHG, TOTPAY, HOSPCHG, or HOSPPAY

- TOTPAY is a negative amount
- TOTCHG is a negative amount

Note: If CAPIND = Y for an admission record, the first two conditions are not checked.

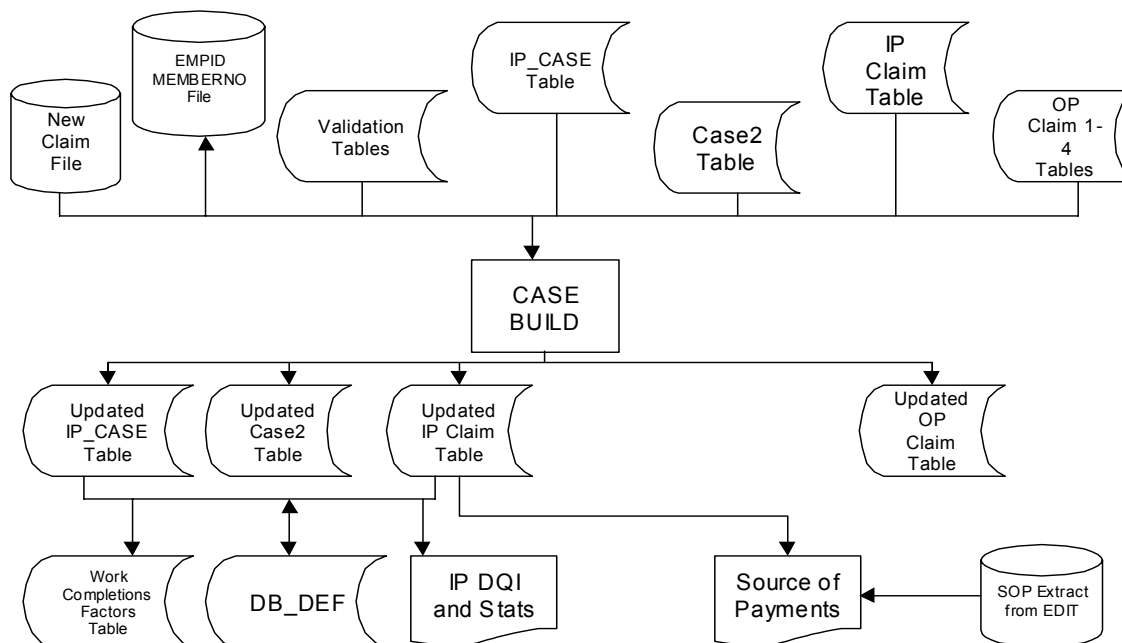


Figure 2: Case Build Process Update Cycle Overview